

Index of Claims		Application/Control No.		Applicant(s)/Patent under Reexamination					
		10720708		NAKHJIRI ET AL.					
		Examiner		Art Unit					
		Shingles, Kristie		2141					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center; padding: 5px;"><input checked="" type="checkbox"/> Rejected</td> <td style="width: 25%; text-align: center; padding: 5px;"><input type="checkbox"/> - Cancelled</td> <td style="width: 25%; text-align: center; padding: 5px;"><input type="checkbox"/> N Non-Elected</td> <td style="width: 25%; text-align: center; padding: 5px;"><input type="checkbox"/> A Appeal</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/> = Allowed</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/> ÷ Restricted</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/> I Interference</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/> O Objected</td> </tr> </table>		<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> - Cancelled	<input type="checkbox"/> N Non-Elected	<input type="checkbox"/> A Appeal	<input type="checkbox"/> = Allowed	<input type="checkbox"/> ÷ Restricted	<input type="checkbox"/> I Interference	<input type="checkbox"/> O Objected
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<input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47									
CLAIM	DATE								
Final	Original	10/27/08							
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12	-								
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17	✓								
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